



Madeline Schatz-Harris Youth Concerto Competition
Applications Must Be Received By: September 2, 2017
(Please note: this is NOT a postmark deadline)

Name: _____

Instrument: _____ Category A B C (circle one)

Age on audition date _____ Birth Date: _____

Address: _____

Phone: _____ Email Address: _____

Parent or Guardian (if under 18): _____

Teacher: _____ Phone: _____ Email Address: _____

Address: _____

COMPOSITION: (please include Concerto #, key signature, Opus #, and provide 3 copies of the concerto on 8.5 x 11 paper, copied on both sides. Please include the title page.)

Composer: _____ Movement: _____
(Movt. # and written tempo)

Movement Length: _____

Name of accompanist: _____

I have read, understand and agree to the rules and regulations of this competition:

Entrant Signature: _____

Parent Signature (if under 18): _____

Check List: (MUST BE COMPLETED)

- ___ Completed & signed application
- ___ Copy of title page of work to be performed
- ___ Three photocopies of work to be performed
- ___ \$50 Entry Fee
- ___ Confirmed with KPOS Music Director that parts are available for piece not listed on recommended works list. (*Attach copy of confirmation email.*)

Send completed application materials to:
Kamuela Philharmonic Orchestra Society, PO Box 2597, Kamuela, HI 96743